Attorney's Docket No.: 14560-020001/P1937

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Andreas Hilliger et al.   Art Unit: 2826
Serial No.: 10/625,463   Examiner: Ahmed N. Sefer
Filed   : July 22, 2003
Title   : FORMATION OF A CONTACT IN A DEVICE, AND THE DEVICE
            INCLUDING THE CONTACT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Fee only

RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

In response to the Notice of Non-Compliant Amendment mailed

January 21, 2005, please amend the application as follows:

Amendments to the Claims begin on page **2** of this paper.

Remarks/Arguments begin on page **9** of this paper.

02/23/2005 HJOHNS01 00000003 061050   10625483
01 FC:1201   400.00 DA

PAGE 2/10 * RCVD AT 2/18/2005 7:52:29 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/1 * DNIS:8729306 * CSID:8586785099 * DURATION (mm-ss):03-10

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

Application or Docket Number: 10/625483

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐   OR   OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	395.00	OR	BASIC FEE	790.00
X$ 9=		OR	X$18=	
X44=		OR	X88=	
+150=		OR	+300=	
TOTAL		OR	TOTAL	

11/10/04 CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 12	Minus ** 20	=
Independent	* 3	Minus *** 5	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			☐

SMALL ENTITY   OR   OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X44=		OR	X88=	
+150=		OR	+300=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 20	Minus ** 20	=
Independent	* 7	Minus *** 5	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X44=		OR	X88=	700.00
+150=		OR	+300=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	700.00

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X44=		OR	X88=	
+150=		OR	+300=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.